

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT		12-2-99
O.I.P.E. CLASSIFIER		12	12-2-99
FORMALITY REVIEW	En	64930	12-23

### INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral) Canceled        A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
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12	✓	✓	
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22	✓	✓	
23	✓	✓	
24	✓	✓	
25	N	N	
26	N	N	
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If more than 150 claims or 10 actions  
staple additional sheet here

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